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UCSF Newsbreak

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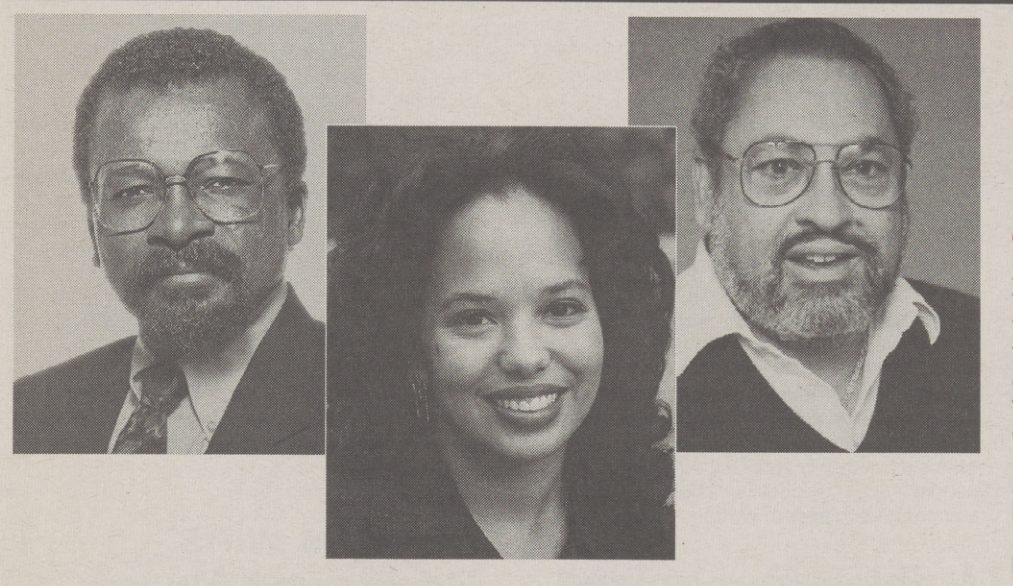


MLK Award winners, left to right, H. Westley Clark, Mallika J. Marshall and Freeman Bradley

H. Westley Clark, Freeman Bradley, Mallika Marshall to receive MLK Awards

By ALLEN J. BALDERSON

Psychiatrist H. Westley Clark, Freeman Bradley, director of Instructional and Research Support Services, and fourth-year medical student Mallika J. Marshall are this year's winners of the Martin Luther King Jr. Award. Given annually during UCSF's week-long celebration of Dr. King's birth, the award recognizes the affirmative action work of one student, staff and faculty member.

Chair of the Committee on Ethnic, Cultural & Gender Diversity in the Department of Psychiatry, H. Westley Clark is known for his dedication to promoting and advancing mutual respect and appreciation for cultural and ethnic diversity on campus. He served on the Medical School Admissions Committee from 1989 to 1992, on faculty search committees for the Department of Psychiatry, as well as on a variety of interview panels for fellows and residency selection, always pressing for racial, ethnic, gender, sexual orientation and age diversity. He is a faculty mentor to many underrepresented medical students, psychiatry residents and junior faculty, and presently serves on the Chancellor's Steering Committee on Diversity.

One of the more popular figures on campus, Freeman Bradley has been at UCSF for the past 37 years. Described in nominating letters as "having the guts to ask hard questions when most choose to be silent," Bradley is a member of both the UC Black Administrators Council and the Chancellor's Minority Businesses Utilization Committee. One of the driving forces behind creating the Office of Affirmative Action, Bradley in 1971 was one of the principal people involved in the strike that resulted in an employee walk-out temporarily shutting down the campus and forcing administration to take a closer look at how people of color were being treated on campus. This led to the creation of the UCSF Black Caucus co-founded by Bradley.

Mallika Marshall has held campus leadership roles since she first became enrolled at UCSF in 1992. Class representative to the Associated Students of the School of Medicine during her first year, secretary of that group during her second year and vice president of the medical student body last year, Marshall is a member and former co-president of the Black Student Health Alliance. She has helped organize a variety of health fairs serving the African-American community, has been a volunteer tutor at the Providence Baptist Church, and a volunteer health care provider for the student-run Homeless

(See **MLK** *on page 6)*

Michele Firpo

A farewell from the editor

To the campus community:

After much consideration, I have decided to leave the University as of Jan. 1 to pursue other endeavors.

Working as the editor of this publication since its inception in 1976, when it was known as Today & Tomorrow, has given me the opportunity to become intimate with this campus and the people who comprise it. The many gifted faculty, staff and students have provided an incredibly rich and varied environment — great material for both the writer and photographer.

I place the publication in the capable hands of the new editor Lisa Cisneros and Michele Firpo, who will continue as the desktop artiste extraordinaire.

Is there really a life beyond UCSF? I shall see.

Allen J. Balderson

Lisa Cisneros

Angry white guy for affirmative action

By ALLEN J. BALDERSON

Journalist Paul Rockwell is not a knee-jerk liberal nor a millionaire who can afford to appear magnanimous. He's a middle-class, angry white guy who is 100 percent behind affirmative action.

At a campus lecture on Dec. 12, Rockwell said that for over 25 years, opponents of affirmative action for people of color and women have overlooked a key American reality — the role of affirmative action in the lives of white men. Opposition to affirmative action, according to Rockwell, "is based on selective inattention to the social preferences on which white men themselves depend."

While many preferential programs exist in the US, the broad spectrum shows that minority programs constitute but a small part. Rockwell, who has written for the San Fran-

(See **ANGRY** *on page 2)*

Will baboon cells give gift of immunity?

Getty doing well after bone marrow transfusion

By ALICE TRINKL

AIDS patient Jeff Getty, 38, at the time of this writing is in good condition after being infused with bone marrow cells from a baboon. A team of physician-researchers from UCSF and the University of Pittsburgh performed the groundbreaking clinical study the evening of Dec. 14 at the SFGH General Clinical Research Center (GCRC). The hope is to restore Getty's immune system, which has been ravaged by the HIV virus.

The experimental procedure was done because baboons have been found to be resistant to HIV-1, the primary AIDS virus. If the baboon cells join with the patient's bone marrow cells, the researchers believe that the patient's augmented bone marrow will then produce HIV-resistant CD4+ T cells. Theoretically, this would increase the patient's ability to ward off the opportunistic infections that can be fatal to AIDS patients.

Getty has been the leading candidate for the trial since the Food and Drug Administration approved the protocol in August.

This is the first time a bone marrow cell infusion from one species to another — often called a xenotransplant — has been attempted using the specific scientific approach that has been approved for this study, the researchers say.

The physician-researchers who conducted the clinical study were Steven Deeks, assistant professor of medicine in the UCSF AIDS Program at SFGH; Paul A. Volberding, professor of medicine and director of the UCSF AIDS Program at SFGH; and surgeon Suzanne T. Ildstad from the University of Pittsburgh.

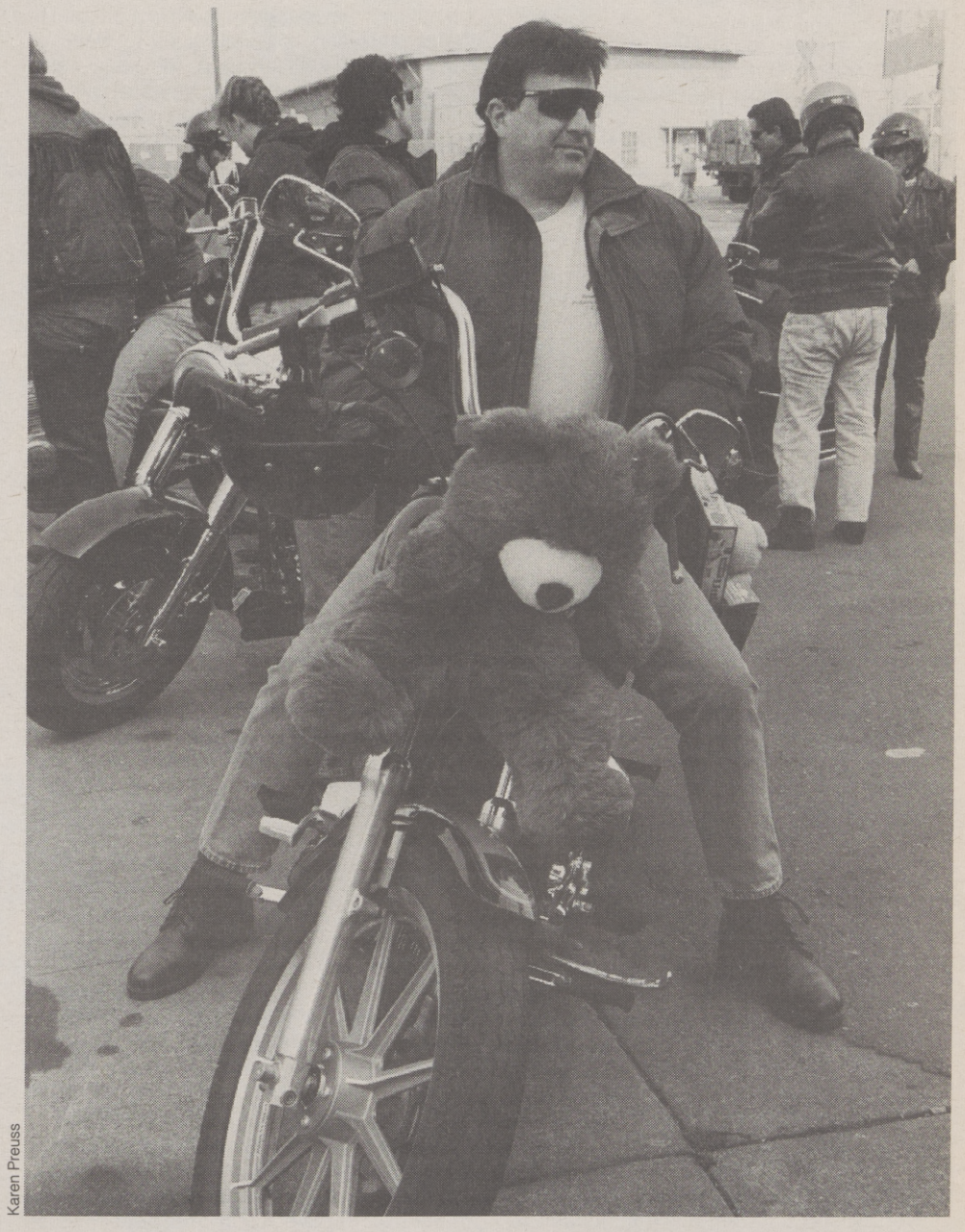
Deeks is the primary physician providing clinical care for the patient. Ildstad processed the baboon bone marrow and prepared it for infusion. Morris Schambelan, professor of medicine, is involved in the study as chief of the GCRC.

It is Ildstad's work which makes this clinical trial a "first-of-its-kind." The xenotransplant was not an infusion of all the baboon bone marrow, rather a "cocktail" of only two types of cells, called stem cells and facilitating cells. It is hoped the baboon stem cells will improve the immune system and the facilitating cells will help the body accept the foreign tissue.

Ildstad and her Pittsburgh team were the first to identify the facilitating cell which, for a reason that is unclear to the researchers, allows stem cells to engraft in foreign environments, including other species, without the adverse reaction called graft-versus-host disease.

"Even though there have been many exciting recent advances in HIV treatment, like new antiretrovirals, patients with advanced

(See **INFUSION** *on page 2)*



Karen Preuss

Bikers make toy run for tikes with HIV

Members of the Rap City Riders made a special ride from Marin to a San Francisco fire station Dec. 3 to drop off toys for children being treated at the UCSF Pediatric HIV Program. This "toy run" project was inspired by bikers Linda and Steve DeLaney and biker and firefighter John Voelker, chair of the SF Firefighters Toy Program, who offered Old Station 30 as a collection site. The UCSF Pediatric HIV Program oversees the care of more than 160 infants and children from throughout Northern California and as far south as Fresno.

Gazette

Appointments

Nicoll

C. Diana Nicoll: Appointed associate dean, medicine, and chief of staff, VAMC. As associate dean, Nicoll is responsible for the joint UC-VAMC academic and teaching programs, assuring that undergraduate and graduate medical education, nursing education and allied health field education is advanced. She also will foster basic science and clinical research. As chief of staff, her top priority is to coordinate changes in the programs mentioned above that maintain their excellence during the currently rapid evolution in health care. Chair of laboratory medicine and chief of laboratory medicine at the VAMC since 1980, Nicoll joined the UCSF faculty in 1977, became a professor in 1985 and served as director of the laboratory medicine residency training program in 1987. A past recipient of her department's teaching award, she now serves as a student mentor.

Private Support

UCSF is pleased to acknowledge the following gifts/pledges of $25,000 or more from individuals, corporations and foundations received Nov. 1-30, 1995. These gifts/pledges have arrived during the final phase of UCSF's Strength to Strength fundraising campaign.

$500,000 - $999,999
Estate of Estelle L. Maloney

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Obstetrics & Gynecology Research and Education Foundation
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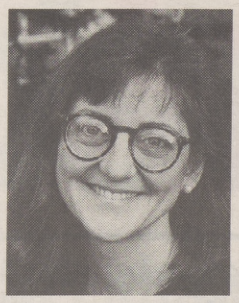
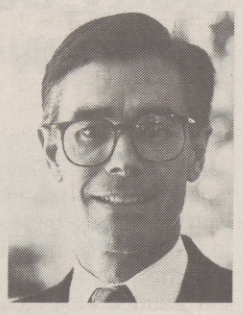
Honors & Awards



Gitschier

Jane Gitschier, medicine & HHMI: 1996 Outstanding Engineering Alumna, Pennsylvania State University.

Gretchen A.W. Gooding, radiology & VAMC: 1994-95 Federal Employee of the Year, Professional Category, San Francisco Bay Area Federal Executive Board.



Coates

Thomas J. Coates, medicine, behavioral medicine & Center for AIDS Prevention Studies: Chair, Panel on Behavioral and Social Sciences and Prevention Research, Office of AIDS Research, NIH.

Edward Yelin, medicine & Institute for Health Policy Studies: 1995 Distinguished Scholar Award, Association of Rheumatology Health Professionals.

APHA award goes to Steinauer

Steinauer

Jody Steinauer, a third-year medical student, received the American Public Health Association's (APHA) Jay S. Drotman Memorial Award.

The award recognizes a young public health professional who has challenged traditional public health policy or practice in a positive manner. Steinauer has been the driving force behind the formation of Medical Students for Choice, a national organization dedicated to reforming reproductive health education and training in the nation's medical schools. Now president of the organization, she continues to work for comprehensive health care, including abortion services, to be taught in all medical schools.

Steinauer received a 1995 Chancellor's Award for the Advancement of Women for her efforts relating to the reproductive health needs of women in this country.

In Memoriam

Peter H. Forsham, 80: Director of the Metabolic Research Unit for 30 years, Forsham was instrumental in developing the Diabetes Teaching Center at UCSF and was a driving force locally and internationally in promoting research and better treatment for diabetes. As early as the 1950s, Forsham argued that to prevent complications of diabetes that can eventually lead to death, it is important to avoid high levels of glucose, the value of which has now been well established. He trained hundreds of physicians and clinical researchers, including many who went on to become leaders in academic medicine worldwide. Forsham formally retired in 1981, but he remained active as a physician and adviser for more than a decade afterward. Memorial donations to the Peter H. Forsham Memorial Lectureship or to the Peter H. Forsham Laboratory may be mailed to the UCSF Foundation, Box 0248, San Francisco, CA 94143.

John Watters, 47: Assistant professor, family & community medicine and the Institute for Health Policy Studies, Watters was a strong advocate of needle exchange programs to protect injection drug users from HIV and to prevent the spread of AIDS. He was lead researcher in a 1994 study published in the Journal of the American Medical Association that found needle exchange programs dramatically curbed the risky practice of needle sharing by addicts without luring newcomers to drug abuse. Watters was a fellow for the US Public Health Service at the National Institute on Drug Abuse, was acting director for the division of drug programs at the San Francisco Health Department and served as director of the Urban Health Study, which was affiliated with the Haight Ashbury Free Clinic, where he began his research involving IV drug users.

Neal Peterson, 66: Before retiring in 1991, Peterson was co-director of the Brain Behavior Research Center, a satellite unit of LPPI located at the Sonoma Development Center. He is best known for his work on the nutritional and biochemical aspects of amino acid metabolism in the developmentally disabled, especially the uptake of tyrosine and its inhibition by phenylalanine in phenylketonurics. Memorial donations may be made to Guide Dogs for the Blind, 350 Los Ranchitos Rd., San Rafael, CA 94903.

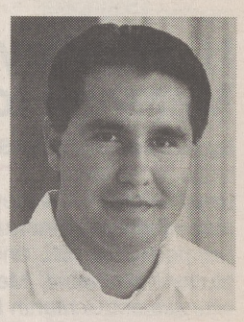
James R. Symon, 51: Symon was an attending physician in the UCSF/Mount Zion emergency room since 1986. Board certified in internal medicine and emergency medicine and board qualified in hematology/oncology, he performed his medical oncology fellowship at UCSF in 1975. Symon explored multiple fields, including field botony. His interest took him to the jungles of Sumatra and Thailand, where he is credited with the discovery of what is probably a new plant species.

Mahley recognized for life achievement

Robert W. Mahley, director of the Gladstone Institute of Cardiovascular Disease and professor of pathology, has received the DeWitt S. Goodman Award for Basic Science Achievement from the National Cholesterol Education Program (NCEP).

Mahley received the Goodman Award for his lifetime contributions to basic science. His research has focused on lipoprotein metabolism, particularly on the structure and function of apolipoproteins. Over the span of his career, Mahley has contributed significantly to the understanding of how lipoproteins function in cardiovascular health and disease. Mahley was recognized for more than 20 years of research into the identification and function of a protein called apolipoprotein E (apo-E) which has been found to have a critical effect on cholesterol metabolism and, more recently, on the pathogenesis of Alzheimer's disease.

Canales wins Rodriguez Award



Canales

Second-year medical student José J. Canales has won the 1995 Edilberto Antonio Rodriquez Award, which is presented each year to a medical student who best exemplifies the qualities of the former UCSF student and physician who dedicated himself to community service.

Deeply committed to making changes in his community and the Latino community in particular, Canales has succeeded in striking a balance between the demands of medical school and his volunteer work. He has worked on college and high school recruitment, targeting Bay Area Latino pre-med groups and other pre-health organizations.

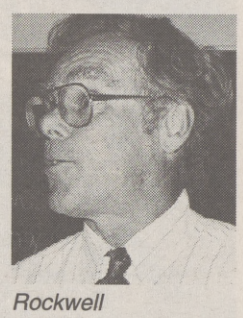
Angry *(from page 1)*

cisco Examiner and the Bay Guardian, cited numerous recent historical examples proving that white males have been benefiting from preferential treatment for quite some time. A case in point is the 1960s where the big affirmative action debate was not over minority programs, but instead about college students, mostly white, who were getting draft deferments while "the brown and black kids from working-class neighborhoods" were sent to Vietnam to die for this country.

He also denounced the white male power structure with its tax breaks for corporations, much higher subsidies for white suburbs than inner cities, and bank bailouts for desperate savings and loan executives.

Looking at recent congressional acts to limit the reproductive rights of women, Rockwell believes that white men in power have organized an ideological attack on women and people of color simultaneously. Proving that women still are not equal, he quoted statistics from a recent book by Susan Faludi called "Backlash": "Two-thirds of all poor white people are women; 75 percent of all the women in the US are making less than $20,000 a year; women's salaries still lag behind men's; women graduating from college are making less than male high school graduates; and women graduating from high school make less than male dropouts."

While congratulating UCSF for its commitment to diversity, Rockwell denounced Governor Wilson and UC Regent Ward Connerly for pushing to end affirmative action at the University and for Connerly's continued involvement with the California Civil Rights Initiative. "Wilson tries to associate color with intelligence," Rockwell said. "But, if you look at the facts, affirmative action has raised the standard of service in our society." Rockwell primarily referred to his studies involving both fire fighters and police officers where, if tests were given today, the minorities and women probably would fare much better than their older, white male counterparts. He said that testing procedures for such organizations are higher today with affirmative action than they were without affirmative action.



Rockwell

The people against affirmative action believe that preferential treatment for race and gender is unfair, said Rockwell. "But, this treatment is based on history, disparity and our sense of justice. It's not based on one race over another, one gender over another." The preferences we have are for democracy, he said.

"In colleges, no one complains about preferential treatment for athletes, affirmative action for the white kid from Montana or for children of alumni. This is an unfair double standard," he said.

Rockwell told the audience that affirmative action is but one small bridge between all people, and that the vitality of this nation can be restored if we reach across the gulf of racism: "when we are color caring instead of color coding."

Acknowledging that he was pretty much preaching to the choir at his UCSF engagement, Rockwell said he and other angry white men for affirmative action need better access to groups opposed to the cause. He hopes soon to plan a march in the town of Fremont.

Rockwell's lecture was sponsored by the Women's Resource Center, Affirmative Action/Equal Opportunity and the Council of Minority Organizations (COMO).

Infusion *(from page 1)*

AIDS have no options at all for restoring their immune function. "We recognize that this clinical trial is highly experimental," says Deeks, "but we are hopeful that we have a chance to succeed and we should learn a great deal about HIV and the immune system."

It will be one to two months before the researchers know if the baboon cells have engrafted, says Deeks, and another couple of months before they can tell if the cells have matured to the point they can fight infections. "Jeff, however, will remain HIV-infected for life," Deeks says.

No surgery required

The procedure did not require surgery, the researchers say, but rather is similar to a blood transfusion. The bone marrow cells from the baboon were processed by Ildstad and her Pittsburgh team in collaboration with colleagues at the UCSF Transplantation Research Laboratory, which is directed by Nancy Ascher, chief of transplant services. The cells were then infused into a vein in Getty's arm. The infusion procedure took approximately 30 minutes.

The infusion was not a classic bone marrow transplant, Deeks explains. In a classic transplant, the bone marrow of the recipient is destroyed in order to receive the donor marrow. In this clinical study, the object was to augment the patient's bone marrow, not replace it. The patient received low dose chemotherapy and radiation to make space in his bone marrow for the new cells. "We did not have to destroy his immune system in order for the procedure to work. Therefore, he should not be profoundly at risk for infections. In fact," Deeks says, "in a person not HIV infected the procedure could be done on an outpatient basis." In the clinical trial, Getty received aggressive antiretroviral treatments to help reduce the risks of the effects of the conditioning on his compromised immune system, Deeks says.

"Aside from feeling nauseated from the conditioning he received before the infusion, Jeff is feeling fine," Deeks says. "We hope he will recover fully in two to three weeks.

"Hopefully, this study will send the message that we, as clinicians and scientists, are frustrated by the slow progress being made in this disease," Deeks says. "It's time to start taking more risks."

UCSF Newsbreak

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Deadline for the next issue, which will cover January 13-26, 1996, will be on **Tuesday, January 2, at 11 a.m.** Please send campus and Medical Center news copy to Lisa Cisneros (476-3256 or lisa_cisneros@quickmail.ucsf.edu), and calendar and gazette items to Michele Firpo (476-3257 or michele_firpo@quickmail.ucsf.edu), all at Box 0462; fax 476-3541. Last-minute copy may be taken over the telephone by calling the above telephone numbers. The University of California is an affirmative action/equal opportunity employer. UCSF fully ascribes to the Americans with Disabilities Act. If at any time, you feel you have a need to view this communication in an alternate format, please contact Lisa Cisneros at 476-3256 with your suggestions.

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Community Consortium task force takes the lead

HMOs asked to treat AIDS patients according to national guidelines

By ALICE TRINKL

In an effort to assure that HIV-infected patients in managed care plans receive necessary levels of health care, a Community Consortium task force has asked health maintenance organizations and major medical groups in the Bay Area voluntarily to review how they deliver care to their HIV-infected patients and to report on whether that care meets national standards.

The goal is to assure that necessary care is provided to patients with HIV disease in managed care settings and that clearly inappropriate care is omitted, according to Thomas Mitchell, Consortium program director. "Our intent is to produce a 'report card' or performance evaluation for local managed care plans so that patients with HIV infection can make informed choices about which health plans they want to join based on the level of care patients receive," Mitchell says.

Enrollment in managed care plans has grown from 29 percent to 51 percent nationally in the past six years, Mitchell points out. In Northern California nearly 90 percent of the insured population is in some form of managed care. The use of capitation in managed care plans puts pressure on the provider of health care to reduce costs by limiting referrals to specialists and limiting expensive procedures, such as a colonoscopy, or the prescribing of an expensive drug, such as oral gancyclovir.

Capitation refers to the amount of money an insurer pays to a health care provider for each patient's care. The provider is paid the same amount of money for each patient, regardless of the patient's health status or whether the patient is likely to require costly medical treatments or procedures.

"This is a particular problem for persons who have chronic illnesses, like HIV infection, which require the use of the health care system more than for a person who is relatively healthy," Mitchell says.

Using guidelines developed nationally, the Community Consortium has sent a letter to local HMOs and medical groups asking them to cooperate in documenting their compliance with the necessary level and standards of care developed by HIV caregivers and experts across the US. The evaluation of performance will be keyed to this standard, which is based upon information from agencies such as the Centers for Disease Control and Prevention and the National Institutes of Health. While there is no enforcement mechanism built into the request for cooperation, the Consortium plans to publicize the results of the performance evaluation, as well as the names of HMOs and medical groups that do not respond, Mitchell said.

The Community Consortium, established in 1985, is an association of more than 200 health care providers who care for the majority of patients with HIV disease in the nine Bay Area counties. Members include health care providers in private practice and those who work at publicly funded clinics, academic medical centers and health maintenance organizations. The Consortium, which is part of UCSF's AIDS Program at SFGH, pioneered the development of community-based clinical research in HIV disease, leading the way for the rest of the country. The Consortium is directed by Donald Abrams, UCSF professor of medicine.

UCSF's Week of Caring: "Over the moon"

Charles Greene, executive director of The Volunteer Center of San Francisco, on Nov. 21 sent the following letter to Chancellor Martin recognizing UCSF for its work during Week of Caring:

"On behalf of the Volunteer Center of San Francisco, I would like to personally thank you and the University for making Week of Caring a huge success. Now in its fourth year, Week of Caring has engaged 1,151 employees in community service projects at over 50 nonprofit agencies in the City.

During a time of budget cuts and down-sizing, it has been unbelievably encouraging to see UCSF's numbers grow steadily over the past three years. With the final tally in, UCSF had 384 participants! (The second highest group had 120 participants.) The number of UCSF employees participating was up 15 percent from last year, largely due to Katherine Riordan and her dedication to volunteerism. She oversaw the entire project from the conceptual state to the design and implementation of the campaign, and her success is apparent year after year.

Week of Caring fosters a team spirit and boosts company morale leaving a lingering effect on both employees and nonprofit agencies. This year, projects ranged from cleaning the environment to serving meals at a homeless shelter, and UCSF's involvement has made a tremendous impact. 'UCSF's Week of Caring went over the moon. The volunteers were enthusiastic, open and loved working with children. We made some valuable contacts and now are considering expanding our educational/vocational program for pregnant teens with the consultation and assistance of some of our interested volunteers,' says Carol Larson from Florence Crittenton Services.

By continually reinforcing our existing collaborations, we build a stronger and healthier city for us all. Thanks again for your continued support."

Few dentists identify or report child abuse

By RUTHANN RICHTER

Dentists are in an ideal position to identify cases of child abuse, as some 50 to 65 percent of abused children suffer injuries to the head and neck, studies have shown. Yet a new survey by UCSF researcher Francisco Ramos-Gomez reveals a surprisingly low level of awareness of child abuse among California dentists, with few saying they have ever seen or reported suspected abuse, despite a law requiring them to notify authorities in such cases.

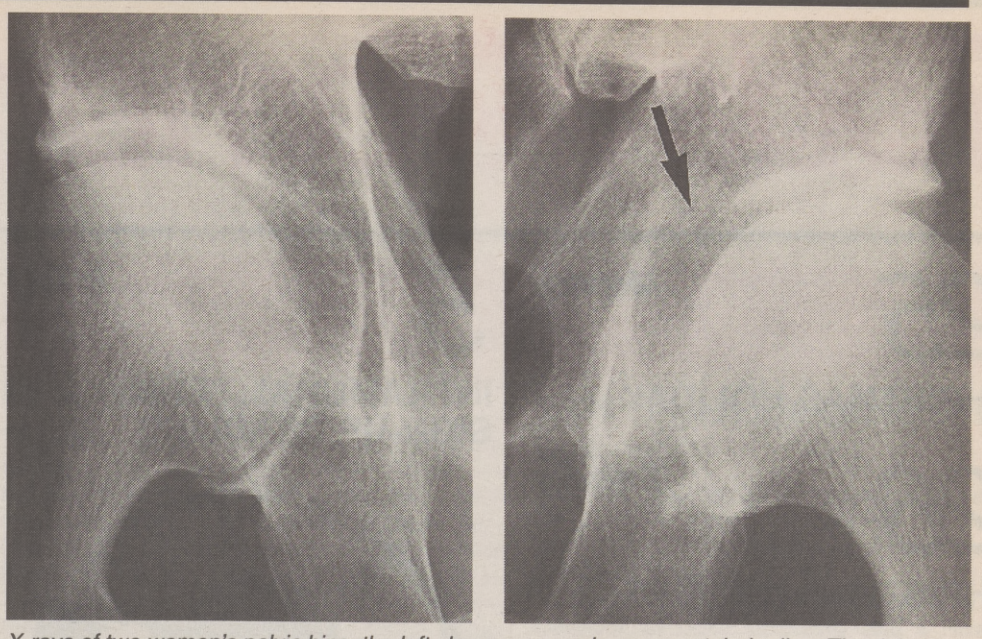
"I think the most shocking results were the low reporting rates. Sixteen percent of the surveyed dentists said they suspected child abuse, but only six percent of those reported it," says Ramos-Gomez, assistant professor of dentistry and the director of pediatric dental services at SFGH. Ramos-Gomez is principal investigator of the study, which he presented Dec. 12 at a Los Angeles news conference. The study was commissioned by PANDA (Prevent Abuse and Neglect through Dental Awareness), a public/private coalition organized by Delta Dental Plan of California to educate dental professionals on child abuse.

Child abuse is a significant public health problem, with 650,000 cases reported in 1993 in California alone, according to PANDA coalition figures. Frequently these children suffer head and neck injuries, such as bruises, bites, burns, cuts on the lip and tongue, fractured jaws and displaced teeth, Ramos-Gomez says. The first place they are likely to seek medical attention is a dentist's office or a hospital-based dental emergency clinic, where they are treated by oral surgeons or pediatric dentists, he says.

Yet his survey of 2,005 California dentists reveals a widespread lack of knowledge among these practitioners about child abuse. Only 23 percent said they had ever received information or formal training on how to diagnose child abuse, and 59 percent said they did not know that failure to report suspected child abuse was a misdemeanor charge under California law, according to the study.

"It's clear that dental schools need to make training part of their curricula," Ramos-Gomez says. "It is a very delicate issue, and it's hard for us to feel comfortable that it's happening, but we need to bring it to the surface and talk about it. And students need to be trained and become sophisticated in dealing with the detection and early recognition of child abuse."

He says he believes dentists may be reluctant to report suspected abuse because of the fear of repercussions, particularly if they practice in a small community. Forty-five percent said they did not know that dental professionals who report suspected abuse in good faith are granted immunity from civil and criminal liability, the study found.



X-rays of two women's pelvic hips: the left shows a normal supra-acetabular line. The right X-ray reveals part of the line is absent. The woman on the right had breast cancer which had metasticized to the hip region.

Radiologists discover new way to diagnose some cancers; another use for MRI

By REBECCA HIGBEE

One hundred years ago, German physicist Wilhelm Conrad Roentgen discovered the X-ray. To say the least, the field of radiology has greatly expanded since, and UCSF has been at the forefront of radiologic advances and discovery.

Performing more than 365,000 imaging procedures a year, the Department of Radiology has expertise in numerous subspecialities, from neurointerventional radiology to ultrasound, Magnetic Resonance Imaging (MRI) — a noninvasive diagnostic technique that produces images of internal body tissues — to positron emission tomography (PET) — another imaging technique that reveals inner workings of the body, primarily 3D mapping of the body's chemistry by using compounds with short-lived radioactive isotopes.

The space alloted here cannot possibly do the department nor the work of its 170 faculty, 40 residents and department chair Ronald Arenson full justice. We instead decided to highlight the latest information from UCSF on this burgeoning field that was presented on Nov. 30 at the 81st Scientific Assembly and annual meeting of the Radiological Society of North America (RSNA).

The first report comes from Clyde A. Helms, professor of radiology and Nancy M. Major, resident in radiology, who have discovered a new indicator of disease, including some cancers, that is found on plain X-ray films. The marker, previously not reported, can help clinicians diagnose and treat abnormalities earlier and prevent unnecessary and costly follow-up examinations. The indicator also is useful for diagnosing bone disease.

As a result of their research, the UCSF team urges that part of the routine examination of plain films of the pelvis should include evaluation of the supra-acetabular line — a line that measures two to three millimeters in thickness that outlines the roof of the hip socket where it joins the pelvis.

"We have found that the absence of this line or change in its appearance is a reliable indicator of disease," Helms says, "and is often the only abnormality noted on the plain film exam."

Helms and Major conducted a study in which they reviewed the films of 22 patients who had been diagnosed with one of many types of cancer that had metastasized, or spread, or with bone disease. In each case, the films showed an interruption, absence, or change of the supra-acetabular line of either the right or the left hip.

The researchers also examined pelvic films of 50 patients without hip pain to evaluate the normal appearance of the supra-acetabular line, which is symmetric in both hips.

In the current era of cost containment, other more costly imaging procedures such as computed tomography, bone scans, or magnetic resonance imaging may in many cases be avoided, Helms says.

MRI — A useful tool in understanding arthritis?

The second study found that magnetic resonance imaging (MRI) may be an effective way to monitor disease progression and treatment response in joint tissues of people with arthritis.

"A barrier to understanding arthritis as a disease thus far has been the lack of reliable methods to monitor disease progression and treatment," says Charles G. Peterfy, assistant professor of radiology and recent recipient of the RSNA Scholar Award.

MRI is a non-invasive, diagnostic technique that produces computerized images of internal body tissues. It is capable of directly visualizing all components of a joint simultaneously, allowing radiologists to evaluate the joint as a whole organ and arthritis as a disease of organ failure, Peterfy says.

Peterfy and his colleagues used MRI with a specialized contrast agent to study the synovial lining — the thin tissue found in joints — of laboratory animals with arthritis. Using this approach, they were able to measure changes in the degree of inflammation in the synovium and assess the severity of arthritis in the animals. The method has not yet been tested on humans.

"Unlike X-rays, MRI allows us not only to see changes in bone structure, but to identify earlier manifestations of the disease in soft tissues, such as cartilage, synovium and other parts that make up the joint as a whole," he says. "

Peterfy's UCSF co-investigators were Timothy Roberts, Jeffrey Mann, Robert Brasch, Philipp Lang, and Harry K. Genant.

Inside UCSF

Blood makes a great gift

The nation's blood supply is at its lowest in January, which is why January is National Volunteer Blood Donor Month. Did you know one donation of whole blood can help up to three patients? Whole blood can be divided into red blood cells, platelets and fresh frozen plasma, separate products that are more necessary for some procedures than others. Here is a list of operations that take place at Moffitt/Long Hospitals and the average number of units of each blood product used.

Operation	Platelets	Red cells or whole blood	Fresh frozen plasma
Bone marrow transplant	12	10	–
Spine procedure (complex)	–	7-8	–
Pediatric cardiac (congenital)	–	4-6	–
Liver transplant (adult)	6	18	34
Liver transplant (child)	2	6	16
Emergency procedure (ruptured aorta)		10-20	–

Donate blood at the UCSF Blood Donor Center, L 131, or call 476-6989 for information.

Source: Maurene Viele, Blood Bank, Moffitt/Long Hospitals

Today/Tomorrow

25 Monday
CHRISTMAS HOLIDAY

26 Tuesday
CHRISTMAS HOLIDAY

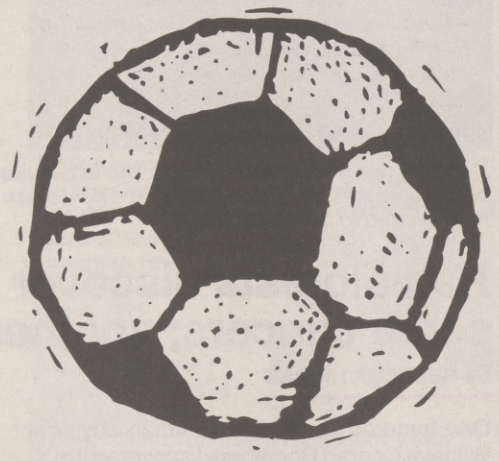
29 Friday
NEW YEAR'S HOLIDAY

1 Monday
NEW YEAR'S HOLIDAY

2 Tuesday
NEW EMPLOYEE BENEFITS ORIENTATION: S 214. 8:30-10:30 a.m. Call Lenard Florendo at 476-1073 to schedule.

3 Wednesday
BROWN BAG LECTURE SERIES: *Stress: Freedom Through Meditation.* David Bezanson, psychologist. Sponsored by Public Service Programs. HSW 300. Noon-1 p.m. Call 476-4394.*

5 Friday
INTRAMURAL TEAM SIGN-UP DEADLINE



If you are getting a team together for Winter Intramural league action, your entry must be dropped off at Millberry Fitness Center today. Pick up an entry form at the Intramural display table in the Fitness Center lobby. Winter quarter sports include basketball, volleyball, indoor soccer and Towerball. Call 476-0356.

INSTITUTE OF HEALING ARTS & SCIENCES LECTURE: *Mid-Life: Facing Limits, New Horizons & Authenticity.* Alan Klaum, author, explores mid-life issues and concerns. N 721. Noon. Call 330-5353.*

6 Saturday
LOW VISION FORUM: Lou Marracci, Telephone Pioneers of America, will distribute telephone equipment for the visually and hearing impaired. Forums are held on the first Saturday of each month. Main foyer, ACC. 11 a.m.-1 p.m. Call Frances Neer at 626-5313 for information.*

8 Monday
HOSPITAL NEW EMPLOYEE ORIENTATION: LPPI Aud. 8:30 a.m.-1 p.m. Department personnel representatives call John Frank at 476-3001 to schedule.

DEAN OF MEDICINE'S RESEARCH SEMINAR
Thyroid Autoimmunity: A Tale of Two Antigens. Basil Rapoport, Med., VAMC; Orlo H. Clark, Surg., UCSF/Mount Zion. N 225. 3-5 p.m.

REFRACTIVE SURGERY SERVICE EDUCATIONAL SEMINAR: *New Surgery Options for the Correction of Nearsightedness.* David Hwang, Oph., Cornea Serv. & Eye Bank. 6 p.m. Call 476-5021 for reservations.*

9 Tuesday
MILLBERRY REGISTRATION BEGINS
Sign up for Brazilian/Caribbean dance, cooking, jewelry making, tai chi, Spanish and much more. Registration for aerobics classes is ongoing. Millberry Fitness Cntr. Call 476-1115.*

- Mon., Jan. 8: Millberry members & UCSF students. 6 a.m.-7 p.m.
- Tues., Jan. 9: UCSF employees & general public. 6 a.m.-9 p.m.

COMMUNITY GROUP MEETING FOR LRDP
Meeting for members of the UCSF Long Range Development Plan community advisory group. Chancellor's Rm., UCSF/Laurel Heights. 6:30 p.m. Call 476-3206.*

10 Wednesday
BROWN BAG LECTURE SERIES: *Actions Affirming Issues of Diversity at UCSF.* Panel discussion with Michael Drake, Admissions & Stud. Prog., Ann Alpers, Med., & Rev. Janet Hanson, Landberg Cntr. Part of UCSF's celebration of Dr. Martin Luther King Jr.'s birthday. Sponsored by Public Service Programs. HSW 300. Noon-1 p.m. Call 476-4394. (See Upcoming Events on page 5 for additional MLK Week events.)*

11 Thursday
SOKOLOW LECTURE
Clinical Applications of Angiogenesis Research. Moses Judah Folkman, Cell Bio., Harvard & Surg., Children's Hosp., Boston. Sokolow Visiting Scientist Lecture sponsored by Dept. Med. N 225. Noon-1 p.m.

MILLBERRY ARTS & PERFORMANCES' COLE HALL CINEMA: *Devil in a Blue Dress.* Children under 14 $2; UCSF students & MU members $2.50; students, seniors & UCSF employees $3; general $3.50. Cole Hall. 5:45 & 8 p.m. (Movies subject to change.) Call 476-2542.*

12 Friday

INSTITUTE OF HEALING ARTS & SCIENCES LECTURE: *Miracles, Gifts & Abilities.* Rod McLean, author, provides information for reinforcing self-esteem. N 721. Noon. Call 330-5353.*

MILLBERRY ARTS & PERFORMANCES' COLE HALL CINEMA: *Devil in a Blue Dress.* Children under 14 $2; UCSF students & MU members $2.50; students, seniors & UCSF employees $3; general $3.50. Cole Hall. 6:30 & 8:45 p.m. (Movies subject to change.) Call 476-2542.*

DEVELOPMENT & TRAINING
For further information call 476-4032.

Survival Skills for the Administrative Assistant. Tues., Jan. 9, 16, 23, 30. 8:30 a.m.-noon. $70.

Travel Expense Processing. Wed., Jan. 10. 9 a.m.-noon. $50.

General Ledger & Accounting. Thurs., Jan. 11. 9:30 a.m.-4:30 p.m. $50.

Vendor Payments. Wed., Jan. 17. 8:30 a.m.-noon. $40.

Supervisor's Training Program. Thurs., Jan. 18, 25, Feb. 1, 8, 15, 22, 29. 8:30 a.m.-noon. $130.

Resolving Employee Conflicts Before They Happen. Wed., Jan. 24. 9 a.m.-4:30 p.m. $90.

Demystifying Gift/Private Grant Acceptance. Wed., Jan. 31. 9 a.m.-noon. $40

Business Writing Basics. Tues. & Fri., Feb. 6, 9, 13, 16. 10 a.m.-1 p.m. $100.

Interviewing: Hiring Winners. Wed., Feb. 7. 8:30 a.m.-4:30 p.m. $90.

The Telephone: Your Most Important Business Tool. Wed., Feb. 14. 9 a.m.-noon. $55.

Processing Independent Consultant Agreements (ICAS). Wed., Feb. 21. 8:30 a.m.-noon. $40.

Contracts & Grants Workshop. Wed., Feb. 28. 9 a.m.-noon. $40.

CONTINUING EDUCATION
MEDICINE

For program information call 476-4251. To register call 476-5808 unless otherwise noted.

Eighteenth Annual Infectious Diseases in Clinical Care. Vail, CO. Jan. 28-Feb. 2.

Eleventh Annual Primary Care Medicine: Concepts & Controversies. Snowmass/Aspen, CO. Feb. 18-23.

Annual Review in Family Medicine: Controversies & Challenges in Primary Care. Hotel Nikko, SF. Mar. 20-22.

Ninth Annual Primary Care Update. Maui, Hawaii. Apr. 7-12.

DENTISTRY

For information and registration call 476-1101.

Second Annual Island Dental Colloquium. Ritz-Carlton Kapalua, Maui, Hawaii. Jan. 22-26.

Contemporary Periodontal Treatment: Integrating New Approaches in General Practice. UCSF. Feb. 10.

Restoring Endodontically Treated Teeth. UCSF. Feb. 3.

Prevention and Management of Medical Emergencies in the Dental Office. UCSF. Mar. 2.

Managing Dental Pain: New & Practical Concepts for Diagnosing & Managing Dental & Orofacial Pain. UCSF. Mar. 9

Fifth Annual Study & Ski in Squaw Valley. Squaw Creek. Mar. 8 & 9.

Advances in Clinical Dentistry — Symposium on New Developments in Dentistry. Moscone Center, SF. Mar. 16.

The Art of Endodontics: Concepts & Techniques for the New Millenium. UCSF. Apr. 13.

AMERICAN SIGN LANGUAGE CLASSES
Psychiatry's Institute on Mental Health and Rehabilitation at the Center on Deafness is offering two classes emphasizing American Sign Language conversational skills that are helpful to mental health and medical providers who wish to communicate directly with deaf and hard-of-hearing patients. Co-sponsored by Gallaudet U Regional Center, Ohlone College. Call 723-7694 (voice & TTY) for information and to register.

INFORMATICS CLASSES
The UCSF Library offers the following free classes held in S 165A (EC) or 222 Library (PC). Call 476-2337 for a complete schedule.

- Mon., Jan. 8: *Medline Plus I: Basics.* (PC). 10 a.m.-noon.
- Wed., Jan. 10: *ENDNOTE® for Mac I.* (EC). 3-5 p.m.
- Thurs., Jan. 11: *ENDNOTE® for Windows I.* (PC). 9-11 a.m.
- Fri., Jan. 12: *Writing for the World Wide Web.* (EC). 10 a.m.-noon.

NEWSBREAK/MEDSOUNDS DEADLINES
Below are the 1996 deadlines for Newsbreak/Medsounds. Copy for the Today/Tomorrow calendar must be received in the Public Affairs office by **11 a.m. on the deadline date** shown below. Dates are Tuesdays, unless otherwise noted.

Please submit items **that are of campuswide appeal** by e-mail to michele_firpo@quickmail.ucsf.edu, by fax at 476-3541 (please call Michele Firpo at 476-3257 to let her know when a fax is coming) or in writing to University Publications/Newsbreak at Box 0462. You also may drop off items at the Public Affairs office, Suite 103, UCSF/Laurel Heights. If absolutely necessary, last-minute copy may be taken over the phone at 476-3257.

Please be sure to include complete information about the event, including topic, location, time, cost (if any) and the speaker's name and affiliation. Also, please include a contact phone number for Michele to call with any questions.

To submit articles for Newsbreak/Medsounds, e-mail them to Lisa Cisneros at lisa_cisneros@quickmail.ucsf.edu, fax to 476-3541 or call 476-3256.

NO.	DEADLINE DATE	FOR THE PERIOD COVERING
Volume 11 #1	**Jan. 2, 1996**	Jan. 13-26, 1996
V11 #2	**Jan. 16**	Jan. 27-Feb. 9
V11 #3	**Jan. 30**	Feb. 10-23
V11 #4	**Mon., Feb. 12**	Feb. 24-Mar. 8
V11 #5	**Feb. 27**	Mar. 9-22
V11 #6	**Mon., Mar. 11**	Mar. 23-Apr. 5
V11 #7	**Mar. 26**	Apr. 6-19
V11 #8	**Apr. 9**	Apr. 20-May 3
V11 #9	**Apr. 23**	May 4-17
V11 #10	**May 7**	May 18-31
V11 #11	**Mon., May 20**	June 1-28 (4 weeks)
V11 #12	**June 18**	June 29-July 26 (4 weeks)
V11 #13	**July 16**	July 27-Aug. 23 (4 weeks)
V11 #14	**Aug. 13**	Aug. 24-Sept. 13 (3 weeks)
V11 #15	**Fri., Aug. 30**	Sept. 14-27
V11 #16	**Sept. 17**	Sept. 28-Oct. 11
V11 #17	**Sept. 30**	Oct. 12-25
V11 #18	**Oct. 15**	Oct. 26-Nov. 8
V11 #19	**Oct. 22**	Nov. 9-22
V11 #20	**Nov. 12**	Nov. 23-Dec. 20 (4 weeks)
V11 #21	**Dec. 10**	Dec. 21, 1996-Jan. 17, 1997 (4 weeks)
Volume 12 #1	**Jan. 7, 1997**	Jan. 18-31, 1997
V12 #2	**Jan. 21, 1997**	Feb. 1-15, 1997

Dec. 23, 1995-Jan. 12, 1996

REGULAR MEETINGS & ONGOING SUPPORT GROUPS

SATURDAYS

HEALING GARDEN WORKING DAYS: Second & fourth Sat. of month. UCSF/Mount Zion Cancer Cntr. Healing Garden, 2356 Sutter. Call 885-3693.*

MONDAYS

DROP-IN SUPPORT GROUP FOR WOMEN LIVING WITH HIV/AIDS: Free child care and beverages provided. A 45. 11 a.m.-1 p.m. Call 476-2417 or 476-7795.*

HEALTH PROFESSIONALS IN RECOVERY: For physicians, nurses, dentists, pharmacists, PhDs and others. Anonymous, 12-step emphasis. Meets bi-monthly. 11:30 a.m.-12:30 p.m. Call 476-8279.

UCSF STAFF COUNCIL MEETING: Second Mon. of month. Noon-2 p.m. Call 476-5756.

FRIENDS OF LOIS AL-ANON MEETING: Closed meeting: for friends & families of alcoholics only. Conf. Rm. A, 3rd fl., MCB. Noon. Call 626-5633.*

COLORECTAL CANCER SUPPORT GROUP: Second and fourth Mon. of month. Reservations must be made at 929-7114. UCSF/Mount Zion Cancer Cntr., 2356 Sutter. 6:30 p.m.*

UCSF AIDS HEALTH PROJECT MEDITATION & SELF-HYPNOSIS WORKSHOP: Weekly discussion group for anyone dealing with HIV or AIDS in themselves or others. Gazebo Rm., Davies Med. Cntr. 7-9 p.m. Call 476-3902.*

TUESDAYS

SFGH CIRCLE OF SISTERS: Networking forum for black women working & studying at UCSF/ SFGH. Meets monthly. Call 476-5222.

MULTIPLE HELPERS OUTREACH NETWORK SUPPORT GROUP: For victims & survivors of violent trauma. Ages 15 & over. A 222, LPPI. 10 a.m.-noon. Help-line at 759-7923 provided daily, 7 a.m.-10 p.m.*

CAMPUS AMNESTY INTERNATIONAL MEETING: First Tues. of the month. MU 111W. Noon-1 p.m. Call 566-8406.*

UCSF GOSPEL CHOIR REHEARSAL: Weekly rehearsals at MCB. Noon. Call 476-6761.*

PARKINSON'S DISEASE EDUCATION & SUPPORT GROUP: For people with Parkinson's & their caregivers. Third Tues. of month. Christ Church, Lutheran, 1090 Quintara (at 20th Ave.). 2-4 p.m. Call 476-9276.*

BREAST CANCER SUPPORT GROUP: For women diagnosed or being treated at UCSF/Mount Zion or Parnassus. UCSF/Mount Zion Cancer Cntr., 2356 Sutter. 5:30-7 p.m. Pre-registration necessary. Call 885-3693 or 388-3742.*

NURSES' PAIN ASSOCIATION MEETING. Second Tues. of month. C 254. 5:30-7:30 p.m.*

BRAIN TUMOR SUPPORT GROUP: First Tues. of month. C 130. 7:30-9 p.m. Call 284-0208.*

WEDNESDAYS

GAY, LESBIAN, BISEXUAL ASSOCIATION AT UCSF MEETING: Second Wed. of month. Members of the Chancellor's Committee on Gay, Lesbian & Bisexual Issues will be present. Call 282-9650.

SUPPORT GROUP FOR FAMILY/FRIENDS OF THOSE WITH MENTAL ILLNESS: Open to anyone interested in learning more about psychiatric disorders & their treatments. Call Laura Deering-Mayclin at 476-7394.*

LATIN AMERICAN CAMPUS ASSOCIATION MEETING: Second Wed. of month. HSW 508. Noon. Call Lucia DeLeon at 476-2010.

LATIN WOMEN COALITION: For Latina faculty, staff & students. Noon-1 p.m. Call Betty Jerez at 476-7117.*

PARNASSUS AL-ANON MEETING: For friends & families of alcoholics. Observers welcome. C 417. Noon-1 p.m. Call 626-5633.*

TAI CHI CLASSES. UCSF/Mount Zion Cancer Cntr. Healing Garden, 2356 Sutter. Noon. 885-3693.*

ALCOHOLICS ANONYMOUS MEETING: Closed meeting: alcoholics only. Conf. Rm. 3, 1st fl., MCB. 12:05 p.m. Call 621-1326.*

MULTIPLE HELPERS OUTREACH NETWORK SUPPORT GROUP: For victims & survivors of violent trauma. Ages 15 & over. Two locations & times: A 222, LPPI, 1-3 p.m., and N 517, 7-10 p.m. Help-line also provided daily, 7 a.m.-10 p.m. at 759-7923.*

FRIENDS & FAMILY MEMBERS OF CANCER PATIENTS SUPPORT GROUP: First & third Wed. of month. J 221, UCSF/Mount Zion Cancer Cntr., 2356 Sutter. 4:30-6 p.m. Call 885-3693.*

BREAST CANCER SUPPORT GROUP: J 221, UCSF/Mount Zion Cancer Cntr., 2356 Sutter. 6:30 p.m. Call 885-3693.*

EATING DISORDERS SUPPORT GROUP: Open to anyone dealing with an eating disorder in themselves or others. M 688. 7-8:30 p.m. Call 332-3425.*

CO-DEPENDENTS ANONYMOUS MEETING: 12-step program for people who have dysfunctional relationships. LPPI A119. 8-9:30 p.m. Call 432-3529.*

THURSDAYS

AWAKE MEETING: AWAKE (alert, well and keeping energetic) is a support and education group for people with sleep apnea and their families. Third Thurs. of month. Bring CPAP equipment for check-up. Call 885-7886.*

CANCER SUPPORT GROUP — PATIENTS: First & third Thurs. of month. J 221, UCSF/Mount Zion Cancer Cntr., 2356 Sutter. Call 885-3693.*

LESBIAN LUNCH GROUP: Monthly on Thurs. Call 476-8410.*

UCSF GOSPEL CHOIR REHEARSAL: Weekly rehearsals at Parnassus. Noon. Call 476-6761.*

HEAD & NECK CANCER SURGERY SUPPORT GROUPS: Separate groups for patients and patients' families meet simultaneously on the second and fourth Thurs. of each month. J 221, UCSF/Mount Zion Cancer Cntr., 2356 Sutter. 1-2 p.m. Call 885-7623.*

PARNASSUS PLAYERS: UCSF's theater group meets regularly. Call 476-6761 or 476-9012 (day) or 821-5701 (evening).*

ASSOCIATION OF CLINICAL RESEARCH NURSES MEETING: Meets every other month, alternating between UCSF & Stanford. 5:45-7:30 p.m. Call 476-0683.*

SUPPORT GROUP FOR WOMEN LIVING WITH LIFE-ALTERING ILLNESS: Alternate Thurs. 6-8 p.m. Call 775-2854 to pre-register.*

FRIDAYS

CIRCLE OF SISTERS: Networking forum for black women working & studying at UCSF. Second & third Fri. of month. Noon-1 p.m. C 130. Call 502-5666.

WEIGHT WATCHERS MEETING: LPPI Aud. Noon-12:45. Call 476-5193.*

ALCOHOLICS ANONYMOUS MEETING: Closed meeting: alcoholics only. C 417. 12:10-1 p.m. Call 621-1326.*

LAKESIDE SENIOR MEDICAL CENTER CAREGIVER SUPPORT GROUP: First Fri. of month. $10 per meeting. 2501 Ocean Ave. at Junipero Serra. 2-4 p.m. Call 986-2305.*

For information on 12-step and support groups call the Bay Area Self-Help Center at 882-6235 or the Mental Health Association of San Francisco at 882-6230.*

THE NEXT DEADLINE

Tues., Jan. 2, 1995 is the deadline for items to be listed in the next calendar, which covers **Jan. 13-26, 1996** (two weeks). Complete information must be received in our office in writing by 11 a.m. on that Tuesday. Mail your copy to Michele Firpo at Box 0462, e-mail it to michele_firpo@quickmail.ucsf.edu, send a fax to 476-3541, bring it to UCSF/Laurel Heights, 3333 California St.,Suite 103or call 476-3257. To submit articles for Newsbreak/Medsounds, e-mail them to Lisa Cisneros at lisa_cisneros@quickmail.ucsf.edu, fax to 476-3541 or call 476-3256.

BREAST CANCER SCREENING SCHEDULE

Women can have low-cost mammograms — X-rays to screen for breast cancer — from a mobile van that travels to convenient locations in the Bay Area.

Women need the approval of their physician to have the mammogram, in addition to their doctor's full name, address (including room number & zip) and phone number to assure that results are mailed promptly. The procedure takes approximately 20 minutes and costs $65. To make an appointment call 476-2193 between 9 a.m. and 3 p.m.*

Because the service has become so popular and appointments often are filled by the time this calendar is published, we list only dates when the van will be at UCSF locations.

♦ Fri., Jan. 5: UCSF/Parnassus at Medical Center Way.

*Open to the public.

Upcoming Events

MLK Week begins

The entire campus is invited to formally congratulate this year's MLK Award winners — psychiatrist H. Westley Clark, Freeman Bradley from Instructional and Research Support Services and fourth-year medical student Mallika Marshall — at the MLK Awards Ceremony on Tuesday, Jan. 16, at 4 p.m. in the Millberry Conference Center. (See page 1 for a full story on the award winners.)

The event is one of many being sponsored by the campus to celebrate Dr. King during the week of Jan. 15 with the national theme of "Passing the Torch — Igniting the Vision of a New Generation."

♦ The award-winning film, "The Color of Fear," will be shown on Tuesday, Jan. 16, from noon to 2 p.m. in Mount Zion's Herbst Hall. This eye-opening film takes place in Ukiah, Calif., where eight men gather for three days at which time they deal with their personal scars of racism. The men, who are African-, Asian- and Latin American, as well as of European decent, talk, yell, argue and cry about their childhood traumas, growing up with no role models and about giving up their ethnicity to become Americans.

♦ The following day, on Wednesday, Jan. 17, the MLK Cultural Festival will take place from 11:30 a.m. to 1:30 p.m. in the Millberry Gym. Besides a wide variety of booths with crafts and ethnic foods, highlights will include Lily Cai's Chinese Dance Troupe, Seattle orator Carl Mak, who will recite excerpts from a King speech, as well as the very popular traditional ethnic dress fashion show.

♦ Also on Jan. 17 from 11 a.m. to 1 p.m., in Mount Zion's Hellman Conference Room there will be another Cultural Festival featuring an ethnic food cook-off.

♦ "The Color of Fear," will be shown again on Thursday, Jan. 18, from 11:30 a.m. to 1:30 p.m., and from 5:30 to 7:30 p.m. in HSW 300.

♦ Also on Jan. 18, there will be a youth panel discussion entitled "Nonviolence and Conflict Resolution" at SFGH from 11:30 a.m. to 1 p.m. in Carr Auditorium. Bay Area youth will come together to discuss their differences and attempt to resolve their conflict.

♦ Mount Zion will host a COMO Fair in Mount Zion's Hellman Room from 11 a.m. to 1 p.m., also on Jan. 18. The event will feature local junior high school bands and singers.

♦ In what promises to be an explosive and challenging discussion, two outspoken and persuasive speakers on the affirmative action issue — Eva Jefferson Patterson and Tom Wood — will face off on Friday, Jan. 19, from noon to 1 p.m. in Cole Hall. Patterson is executive director of the Lawyers Committee for Civil Rights and co-chair of Californians for Affirmative Action. Wood is co-author of the California Civil Rights Initiative. The two will address the issue "Is Affirmative Action a Civil Right?"

♦ In addition to the above activities, the week before King's birthday, there will be a panel discussion on "Actions Affirming Diversity Issues at UCSF" on Wednesday, Jan. 10, from noon to 1 p.m. in HSW 300. Speakers will include ophthalmologist Michael Drake, associate dean, School of Medicine Admissions and Student Programs; attorney Ann Alpers; and Rev. Janet Hanson of the Landberg Center.

For further information on any of the above events, call 476-5222.

How to recognize and deal with lying

Faculty and staff are welcome to attend a free, one-day course on "Dishonest and Honest Communication: How to Recognize and Deal with Lying," to be taught by psychiatry professor Paul Ekman on Saturday, Jan. 20, from 9:30 a.m. to 5 p.m. Listed as Psychology 198, this is a one-unit course that students can receive credit for attending.

Ekman has taught the same course to members of the FBI, CIA, ATF, state judges, federal judges and state and local police. He will show videotapes with subjects ranging from Oliver North to Susan Smith. For more information on the event, call 476-7208.

1996 Gladstone Lecturer is Lefkowitz

The 1996 Gladstone Distinguished Lecture will be given by Robert J. Lefkowitz on Friday, Jan. 26, in Carr Auditorium at SFGH. The lecture starts at noon.

Lefkowitz is a professor of biochemistry and medicine at Duke University and a Howard Hughes Medical Institute Investigator. He also is a member of the National Academy of Sciences.

Lefkowitz is known internationally for his seminal work in the area of beta adrenergic receptor structure and signaling. In June 1995, he receive the Gerald D. Aurbach Lecture Award, presented at the Endocrine Society's annual meeting, for his many contributions to the study of the mechanisms of hormone action. In addition to his contributions to the biochemical and molecular biological characterization of the beta adrenergic receptor, he was one of the first researchers in the field of G protein-coupled receptors in target cells. The clinical implications of Lefkowitz's work suggest potential drug therapies that could block protein switches on cells to improve heart function in patients with heart failure. Recent work with transgenic animals by Lefkowitz and his associates has demonstrated that the principles of signal transductions that effect cellular systems also are crucial in maintaining the physiological balance of the entire animal.

Dinner à la Heart

The Mount Zion Institute on Aging Associates' 13th annual Dinner à la Heart fund-raiser is slated for Tuesday, Jan. 30, at 7 p.m.

This fund-raiser benefits the Mount Zion Institute on Aging, which provides services to the citizens of San Francisco, the East Bay, Marin and the Peninsula. The event costs $45, $64, $85 and $100 per person. Some of the restaurants participating this year are Fleur de Lys, Boulevard, Fringale, Bix, Ecco and Brasserie Savoy. For more information, call 750-4124.

Fight for safe abortion

"From Danger to Dignity: The Fight for Safe Abortion," is the title of a video and discussion slated for Tuesday, Jan. 30, from noon to 1:30 p.m. in Toland Hall. After the video is shown, Beth Seltzer, co-producer, will lead a discussion about one of the most controversial issues of our time. The video weaves together stories of underground activists and outspoken legislators, to show how individuals and organizations succeeded in ending the tragedies of illegal abortions and making abortion a safe, legal choice. This free event is sponsored by the Women's Resource Center.

Institute of Healing Arts and Sciences teaches alternative healing

The Institute of Healing Arts and Sciences at UCSF offers a workshop on Sound Healing on Tuesday, Feb. 13, and Thursday, Feb. 15, from 6 to 9 p.m. This workshop will explain that disease and stress result from being out of synchrony with the rhythm of nature. Instructor Phillip Scott will use the power of sound and vibration — through voice, musical instruments and movement to reestablish health and thereby effect healing. Cost for this workshop is $60 for one or $100 for two. It is necessary to call 479-5002 to pre-register and to receive a room number.

On Saturday, April 13, from 9:30 a.m. to 4:30 p.m., Michael Mayer, an instructor and director of The Psychotherapy Healing Center, will teach a workshop on Tai Chi Chuan. An ancient method of meditation in motion, Tai Chi Chuan helps free the flow of one's inner rivers of *chi,* the body's electromagnetic energy. In this workshop, participants can discover why Western scientists are currently studying the healing effects of this ancient form of movement.

Please note: neither the University nor the Institute is responsible for the content of lectures or workshops. The Institute offers these programs as part of its mission to promote wellness and complementary healing modalities through its programs.

Fun Zone

Venture outdoors

Find out how you can learn new skills and meet new people in cooperative outdoor adventuring. For an in-depth look at Outdoor Unlimited's resources and services, come to a meeting Monday, Jan. 23, at 7 p.m. in the Outdoors Unlimited Center. Call 476-2078 for more information.

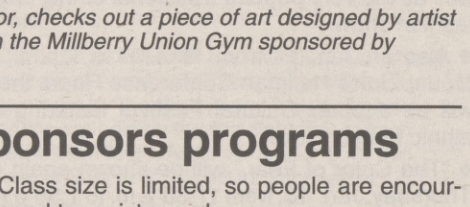
Valentine serenade

The UCSF Orchestra will perform for you and your valentine on Tuesday, Feb. 13, at 7:30 p.m. in the Millberry Union Gym.Tickets are free for UCSF students; $5 for the public and $3 for Millberry members. Under the direction of Jeremy Swerling, this concert features the winner of the First Annual UCSF Piano Competition.

Gospel choir sings

The Gospel Choir at UCSF gives its tribute to Black Heritage Month on Friday, Feb. 23, at 6:30 p.m. in Cole Hall.Tickets are $5 for the general public and $3 for employees.

Family ski trip to Tahoe



Take the family on a scenic cross-country ski trip to Lake Tahoe. Children under 12 are free the weekend of April 6 and 7. Cost varies. The pre-trip meeting is Tuesday, March 26, at 7 p.m. Sign-ups startTuesday, March 12. Call Outdoors Unlimted at 476-2078 for details.

Lisa Cisneros

On the trail to victory

Willie Brown shakes hands with a potential voter at the Moffitt Cafe on the campaign trail Nov. 28. The former California Assemblyman greeted faculty, staff and the public in various eateries on UCSF's Parnassus campus. Brown will be innaugurated as San Francisco's mayor on Monday, Jan. 8.

Lisa Cisneros

Millberry fair offers alternative to mall mania

Jerry Lopez, right, a student financial aid counselor, checks out a piece of art designed by artist Pam Foley at the sixth annual holiday crafts fair in the Millberry Union Gym sponsored by EMPACT!

Center on Deafness sponsors programs

This winter, the Institute on Mental Health and Rehabilitation at the UCSF Center on Deafness will be sponsoring American Sign Language classes and a series of presentations designed to help families with a member who is deaf or hard-of-hearing.

American Sign Language (ASL) classes will be taught by Joyce Houghton, a deaf teacher, starting Monday, Jan. 29, continuing through Monday, March 4. ASL for beginners will be taught on Mondays and Wednesdays from 4:30 to 6:15 p.m. IntermediateASL will be taught on Mondays from 6:30 to 8 p.m. Both classes will be held on the Parnassus campus. Classes focus on basic conversational skills to assist medical and mental health personnel communicate with deaf clients. For registration, please contact Kerry O' Connor at 723-7694 or email to kerryo@leland.stanford.edu. Cost is $175 for Beginning ASL; $75 for Intermediate ASL. Class size is limited, so people are encouraged to register early.

A series of presentations on interventions with families who have a member who is deaf or hard-of-hearing will be held on Wednesday evenings beginning Jan. 31 at the Laurel Heights campus. This series is being co-sponsored by the Gallaudet University Regional Center at Ohlone College in Fremont.

Each week different families with a deaf or hard-of-hearing member will tell their own history. Case managers, family therapists and other service providers will outline treatment plans implemented with the families. Topics include deaf parents, cochlear implants, sibling relationships and families with a newly diagnosed deaf child. To register for an individual session or for the entire series, contact Tracy Van Zanten at (510) 659-6268 voice/TTY.

Medical Call Board

Aging, muscle function

Doctors in the Deptartment of Radiology are looking for healthy, non-smoking sedentary men and women to participate in ongoing studies of muscle function, aging and fatigue. Volunteers must be between the ages of 65 and 85 and be free from heart disease, high blood pressure and diabetes. Measures of muscle function will be taken during rest and exercise. Measures of physical activity and muscle size also will be obtained. Studies will take place at the VAMC. Volunteers will be compensated for their time. For more information, call Peter Allen at 750-2158.

Alcoholics wanted

The Gallo Clinic and Research Center, a division of the Department of Neurology at UCSF, is seeking alcoholics to participate in their studies on alcoholism. This research involves interviews, written questionnaires and a blood test. Participants must be adults who frequently drinks large amounts of alcohol. There will be cash compensation for participating. For more information, call Cassi Vietan at 648-7111, ext. 408.

Glaucoma disease

UCSF researchers are seeking African-American volunteers for a study to determine whether eyedrops commonly used to treat glaucoma may be able to prevent the blinding disease, a major cause of vision loss in the US.

African Americans between the ages of 40 and 80 may be eligible for the study if they have ocular hypertension, high fluid pressure inside the eye that often precedes glaucoma. Many people with this condition don't know they have it, and prospective volunteers who believe they are at risk my call the study coordinator for a free screening. Besides African ancestry, other risk factors include diabetes, high blood pressure, nearsightedness and a family history of glaucoma.

For more information or to schedule a screening, call Peggy Yamada at 476-3711.

Pressure ulcers

The School of Nursing's Department of Physiological Nursing is conducting a study to examine nutrition and circulation in individuals with pressure ulcers, also known as bedsores, who are living at home. Measures taken in the study would take place in the home. Participants in this study should have bedsores and be aged 55 or older. Participants also should be taking their nutrition orally, speak English and have a telephone. For more information, call Nancy A. Stotts at 476-4412.

Ten things you can do to stop AIDS

BY REBECCA HIGBEE

UCSF AIDS prevention researchers are suggesting 10 things the public can do to help stop the spread of AIDS, echoing the theme of this year's World AIDS Day "Shared Rights, Shared Responsibilities."

"Everyone has a right to remain healthy, and we all share the responsibility to make sure that's possible," says Pamela DeCarlo, information manager for the UCSF Center for AIDS Prevention Studies. DeCarlo distributed a "tip sheet" of "10 Things You Can Do To Stop AIDS" to community organizations, schools, legislators, funding agencies and the media.

"Prevention is a hard sell and it takes time, but small changes can make a big difference," DeCarlo says. For example, in San Francisco, new HIV infections reached a high of 8,000 in 1982. In 1994, the estimated number of new HIV infections was 1,000.

The 10 tips include:

1) Donate to drug treatment clinics. Estimates show that of the 40,000 new HIV infections occurring in the US every year, two-thirds are due to injection drug use. However, fewer than 15 percent of injection drug users are in treatment at any given time. To slow drug use, we should ensure treatment for everyone who wants it.

2) Volunteer. Community-based prevention programs work best when they are run by the people from the community. Call your local Health Department to get a list of AIDS organizations in your community.

3) Talk to your partner. Get to know your partner before you have sex. Good communication is essential to negotiating safer sex.

4) Talk to your friends. If your friend is HIV-positive, has a drug or alcohol problem, or is having a hard time in a relationship, give your support. If your friend is HIV-negative and happy and healthy, share the joy.

5) Vote. All Americans have equal power to make change by voting. Find out candidates' positions on AIDS funding, sex education, drug treatment, and Medicaid. "People who oppose shared responsibilities often speak the loudest and vote most regularly," DeCarlo says.

6) Join your PTA. One out of every four new AIDS cases occurs in someone under the age of 22 — people who were most likely first infected as adolescents or pre-teens. Seventy percent of all teens who graduate from high school are sexually active, and teens have the highest rates of sexually transmitted diseases of any age group.

7) Talk to your children. If you have children, initiate conversations about sex. Start at a young enough age so that you can give them guidance before they have started to feel peer pressure. An important part of talking to your children is also listening.

8) Contact your congress person. Keep track of what's happening in AIDS issues in Congress, and contact your representatives in a timely manner.

9) Don't be a NIMBY (Not In My Back Yard). According to DeCarlo, the HIV epidemic is inextricably linked to many of society's illnesses that affect everyone: racism, sexism, economic inequality, homophobia, drug abuse and homelessness, among others. "An effective way to treat AIDS is to simultaneously treat the other ills," she says.

10) Get tested. If you're not in a monogamous relationship, or have begun a new relationship in the past six months, get an anonymous HIV test. "The earlier HIV is diagnosed, the better your chances for a longer, healthy life," DeCarlo says. If your test is negative, rededicate yourself to remaining negative by protecting yourself and your loved ones. For an anonymous test site near you, call the Centers for Disease Control and Prevention AIDS Hotline at (800) 352-AIDS.

Established at UCSF in 1986 and directed by Thomas J. Coates, CAPS is the largest consolidated research effort in the country focusing on the social and behavioral aspects of AIDS prevention and early intervention.

MLK *(from page 1)*

Health Care Clinic. On her medical school application, Marshall wrote: "Disadvantaged people need dedicated physicians who not only want to heal their wounds, but also want to help them lead healthier and more productive lives. I want to be that kind of doctor."

The entire campus is invited to formally congratulate Clark, Bradley and Marshall at the MLK Awards Ceremony on Tuesday, Jan. 16, at 4 p.m. in the Millberry Conference Center. The event is one of many being sponsored by the campus to celebrate Dr. King during the week of Jan. 15 with the national theme of "Passing the Torch — Igniting the Vision of a New Generation." See Upcoming Events section on page 5 for details.

Fund Performances

For those invested in the 403(b) Plan and the After-tax plan, here are the latest unit values and monthly factors (as of Nov. 30, 1995). The annualized yield reflects the annual yield that could be achieved if the current monthly rate were compounded for one year.

	Monthly Factors	Annual Rate	Annualized Yield
Savings	.0051	6.22%	6.31%
Money Mkt	.0047	5.77%	5.84%
ICCF	.0064	7.73%	7.90%

	Unit Values	12-Month Change	3-Year Avg. Annualized Return
Bond	$77.36	33.6%	13.5%
Equity	$138.55	32.7%	15.2%
Multi-Asset	$17.77	19.6%	10.6%

The investment results, as measured by total return figures given above, represent past performance and should not be considered indicative of future results. If you have questions, please call 476-9256.

Medsounds Continued

Lisa Cisneros

ACC lobby gets renovated with art

Cindy Perlis, right, director of Art for Recovery, stands with Barbara Goodman, the sponsor of "Healing Tile Project," an ongoing program that gives ACC health care providers and staff an opportunity to express themselves by painting ceramic tiles to be displayed throughout the building. The tiles were unveiled Dec. 4 during a ceremony celebrating the renovation of the Robert H. Crede ACC and honoring employees who received special performance awards.

It's "the Ripple effect"

Lisa Cisneros

Jane Rowe, left, president of the Hospitals Auxiliary presents Helen B. Ripple, former director of nursing at the Medical Center, with a flower lei Nov. 17 when the Auxiliary dedicated a refurbished 15th floor patient waiting room in her honor. Later, friends and colleagues gathered at a reception at the Millberry Union Conference Center to praise Ripple's leadership and dedication to quality care at the Medical Center. One noted the "Ripple effect" it had on others. Ripple, who served at UCSF for 15 years, resigned from her post in February and now works as chief executive officer of Guam Memorial Hospital.

Aneurysm *(from page 8)*

Halbach explains.

Even some accessible aneurysms can be difficult to treat surgically. A common surgical procedure for treating an aneurysm involves insertion of a metal clip at the location of the bulge in the affected blood vessel. But a very large aneurysm, which can be up to an inch or so across, is difficult to clip successfully, as is an aneurysm that is heavily calcified or that has a wide neck or no neck where the aneurysm connects to the blood vessel.

About 15 percent of brain aneurysms occur in the back of the brain where blood vessels are difficult to reach. In these cases, death or brain damage has been an outcome in up to one-third of aneurysm surgeries, according to Halbach. Many aneurysms in the back of the brain are now being considered for non-surgical treatment, and the UCSF team treats a large number of these cases.

"The most difficult aneurysms are being referred to us, and about half the aneurysms we treat occur in the back of the brain," Halbach says.

About half of these posterior brain aneurysms treated by the UCSF group occur at a point in the brain circulation called the basilar tip, where treatment is especially difficult.

"A basilar aneurysm presents a worst-case scenario," Halbach explains. "The basilar artery is very important because it supplies the brain stem. Tiny blood vessels, called perforators, arise from the brain stem, and damage to one of these can cause loss of function in the arm or leg, a coma, or inability to swallow—so treatment is quite problematic."

The UCSF team recently analyzed outcomes for 33 patients treated at UCSF with coils for basilar aneurysms from October 1991 through April 1995. Twenty-three patients had already exhibited some bleeding from their aneurysms, and all had previously been excluded as candidates for surgical clipping. The average length of follow-up for the study was 15 months.

Treatment with coils was possible in all but two cases. Treatment completely sealed the aneurysm in seven patients and blocked more than 90 percent of the aneurysm in 17 more patients. The procedure occluded 50 to 89 percent of the aneurysm in seven patients. Two patients had some loss of brain function as a result of bleeding that occurred after coil placement.

The short-term results in this surgically inoperable group of patients compares much more favorably than to what would be expected if these same aneurysms had gone untreated, according to Halbach. However, he emphasizes that longer follow-up is needed to better assess the value of non-surgical treatment with the coils.

Patient *(from page 8)*

ing team and refined by a committee with input from employees including a union representative, creates patient care teams that shift duties from ancillary and support departments to patient care units. The teams will include nurses, unit service coordinators plus two new positions: patient care assistant (PCA) and patient services assistant (PSA).

Although the current staffing ratio of nurses will remain the same, they will assume more responsibility for directing and coordinating other team members, says Jane Hirsch, director of nursing. In the past few weeks, nurses have been trained in team-building and shown how to perform technical skills of the others.

The role of the unit service coordinators will broaden slightly as they assume some admitting and record keeping duties. Returning patients will gain the convenience of being admitted at the unit instead of going to the admissions department first, Hirsch explains.

The two new jobs of PCA and PSA combine duties now performed by employees from several departments. For example, the PCA will be trained in phlebotomy, EKG, meal ordering and delivery for patients, as well as nursing assistant responsibilities. The PSA will clean patient rooms and equipment, tidy nursing units, stock shelves and will answer patient lights.

While training for these positions will begin the first of January, some 75 employees took classes in English, sponsored by the Medical Center, to help them apply for the jobs and to do the work once hired.

In the second phase of the reorganization, the functions of respiratory care, social work and rehabilitation services will be realigned with the patient care teams.

The reorganization of inpatient care will mean layoffs as jobs are consolidated,but any staff reductions will be made in inverse order of seniority. No one will be laid off before the plan is implemented.

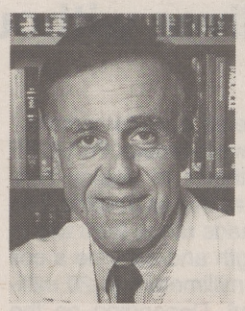
David Odato, manager of Human Resources and Jennifer Dickman, a nurse manager, are coordinating the redesign. Specifics about the transition are spelled out in a new newsletter, Patient Care Update. For more information, call Odato at 476-4846 or Dickman at 476-1618.

Headaches *(from page 8)*

To the contrary, though, research over the last 15 years shows that migraine sufferers have psychological profiles no different than the public at large. "Although there is no doubt that worry and anxiety may serve as [headache] activators, there is no evidence that migraine is a pyschosomatic illness," Raskin says.

To understand how headaches occur, it's important to differentiate between causation and activation. Activators, such as low back pain for example, do not cause headaches, but they can trigger the onset of one, says Raskin. It's very difficult to heal the head without dealing with a secondary source of pain first, he says.

So what causes a headache? Although the chain of events that leads to migraine is yet to be fully understood, Raskin says, it's clearly a biological problem centered in the brain stem, that portion which connects the cerebral hemispheres with the spinal cord. Not only has evidence from animal experiments shown that the brain stem appears to be involved in the pathophysiology of migraine, Raskin's research has found the only direct clinical evidence of this in humans to date.



Raskin

The latest discovery in this field, published in the July 1995 journal of Nature Medicine by a team of German researchers from the University of Essen, supports Raskin's findings. Using the high-resolution positron emission tomography (PET), to examine the changes in regional cerebral blood flow as a way to monitor neuronal activity of the brain during spontaneous migraine attacks, the German researchers found increased blood flow in the cerebral hemispheres and the brain stem.

"However, only the brain stem activation persisted after the injection of sumatriptan had induced complete relief from headache and phono- and photophobia," the German researchers wrote. "These findings support the idea that the pathogenesis of migraine is related to an imbalance in activity between brain stem nuclei regulating antinociception and vascular control." This particular study did not identify the specific brain stem nuclei as the source of migraine because that was beyond the resolution of the PET camera.

While most researchers agree that cerebral blood flow changes are an important feature of migraine, the actual mechanism of pain remains unknown. Most no longer see vascular changes as the primary cause for pain in migraine, Raskin says.

Triggers, treatments

Regardless of the physiological underpinnings, migraineurs are vulnerable to a number of dietary and environmental triggers that can activate a headache, says Raskin, who helped identify in 1972 that headaches are triggered by nitrite, a chemical used to redden cured meats like hot dogs that would otherwise appear gray-brown. Being exposed to bright lights, loud noise and cigarette smoke provoke migraine attacks for Morrison.

While Raskin advises adults to be sensitive to food in their diet, he says it's very unusual to solve a headache simply by changing the diet alone. For children, however, it is very important to look at food for provocation of a headache just as it is important to test their vision as a trigger for headaches, Raskin points out.

The simplest way to treat a headache is to take some aspirin and retreat into a dark, quiet spot to sleep. Sleep is a natural deactivator of headaches as are exercise and falling in love, according to Raskin. Unfortunately, these feelings of exhilaration are fleeting, and most people seek more permanent and consistent methods to cure a headache.

Headache triggers

Dietary factors: foods such as chocolate, red wine, nitrites (found in cured meats), tyramines (found in many foods including avocados, bananas, beans, chocolate, dried fruit and nuts) and dairy products.

Environmental factors: bright or flickering lights, loud or repetitive noise, strong odors, altitude changes and weather changes.

Other factors: allergies, missed meals, too much or too little sleep, birth control pills, dehydration, hormonal changes and tobacco products in general.

Over-the-counter drugs such as aspirin or acetaminophen (Tylenol) can be effective pain killers. However, as in Morrison's case, it is often necessary to recommend prescription drugs for migraine sufferers who do not respond to these over-the-counter drugs, Raskin says. "We don't have any perfect medicines. Some people have to go through several drugs to get relief."

Prescription medicines, such as amitriptyline, propranolol and verapamil can be taken daily to stabilize the migraine generator in the brain stem in a way similar to how epileptic seizures can be controlled with drugs. It is believed that these medicines have a long-term stabilizing ability although headaches may come back in a few years. Most patients are typically treated and cured over six months to a year, says Raskin, who adds that sumatriptan has revolutionized the way menstrual headaches are treated.

Although a few people complain about memory loss after a headache, Raskin believes that the loss is only a temporary inability to concentrate and comprehend as the mental process slows down. "You're not literally losing your mind," he says.

Non-drug treatment options for headaches include acupuncture, Chinese herbs, homeopathic medicine as well as biofeedback and other relaxation techniques. People who can muster up the internal energy it takes to learn meditation and yoga can hit a relaxation zone to control headaches, Raskin says, "but you have to be really good at it."

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Page 1 ... UCSF announces MLK award winners

Page 1 ... Angry white guy supports affirmative action

UCSF
Medsounds

Lisa Cisneros

Young shows holiday spirit at UCSF

San Francisco '49er Steve Young visited the UCSF Children's Medical Center Dec. 5 giving stuffed bears and holiday wishes to dozens of patients, including 8-year-old Jamie Padilla of Arnold. Carolyn M. Bechtel, right, of the Gary Bechtel Family, benefactors of the pediatric urology programs at UCSF, also greeted children and was present when amateur artist William DeFur of Campbell showed off his life-size sculpture of the quarterback, donated to UCSF by The Forever Young Foundation.

Med Center plans for 1996 and beyond

By LISA CISNEROS

After the Medical Center posted a $2 million loss through October, administrators announced recently that they can no longer keep pace with declining revenues without utilizing new methods to reduce costs.

"We are now losing money for the first time in the history of our organization," Bruce Schroffel, director of operations, told employees at a recent town hall meeting.

Meanwhile, the Medical Center's $446 million operating budget faces a $7 million deficit in 1995-96 if current budget projects hold true.

Under pressure from employers, HMOs and the federal government to cut costs, the Medical Center is losing money largely because reimbursement from third-party payers is lower than what it used to be. For example, the Medical Center will lose approximately $5 million this year if it is awarded a contract to continue doing work with Blue Cross.

The Medical Center's finances also depend on how Medicare and Medicaid programs will be funded. As major funding sources for the Medical Center are the subject of ongoing budget battles on Capitol Hill, the nation awaits some type of budget compromise between the President and Congress.

One positive note, however, is that recent settlements with the federal government over Medicare and Medicaid payments held up from previous years, resulted in significant reimbursements to the Medical Center. But that money has already been earmarked for capital projects, including construction of medical office buildings under way near Mount Zion.

While the Medical Center actually has seen an increase in patient admissions, the length of stay for these patients has dropped significantly as a consequence of more patients moving into managed care plans. With an average daily census of about 395, patient days this year are likely to continue to decline to about 142,350, down from about 190,000 only four years ago, explains Schroffel. Outpatient visits through October did not meet budgeted projections of 142,053 and instead equated only 136,566.

In other news, four clinics in the ACC are piloting a new automated telephone system, which will be expanded to all primary care clinics in the ACC next year. Besides minimizing the number of misdirected calls and busy signals that frustrate patients trying to contact their health care providers, the new system allows physicians to answer calls in exam rooms, and, most importantly, enhances patient access. A Customer Service Center, to open at Laurel Heights in April, will serve as the hub for the telephone system that will give patients the ability to make one call to schedule appointments, renew prescriptions and make billing inquiries, among other things.

Redesigning inpatient care

By LISA CISNEROS

Realizing inpatient services must be redesigned to adjust for the changing health care market, the Medical Center has begun an extensive training program so employees are prepared to implement changes by April 1.

"We've got to take the lead in changing the organizational structure of this hospital and that's in keeping with UC's history of being on the cutting edge of health care," Bruce Schroffel, director of operations, told employees at a recent town hall meeting.

While the ultimate goal of revamping inpatient care is to better serve and satisfy patients, the Medical Center must also continue to reduce expenses. See adjacent story.

In a nutshell, the first phase of the plan as initially recommended by an internal consult-

(See **PATIENT** *on page 7)*

New aneurysm treatment saves lives without surgery

By JEFFREY NORRIS

A new advance in the prevention and treatment of strokes that result from ruptured blood vessels in the brain has been tested intensively with good results by a group of UCSF physicians.

The UCSF team, practicing a specialty called interventional neuroradiology, is playing a leading role in demonstrating the value of non-surgical methods that can be used to repair a brain aneurysm — a distended sac that forms on a blood vessel in the brain, causing the vessel to deviate from its normal cylindrical form and to become thin, weak and susceptible to rupture.

Using a new non-surgical technique, the physicians fill an aneurysm with tiny metal coils, recently approved for use by the Food and Drug Administration.

"Each year, about 30,000 Americans experience a ruptured brain aneurysm," according to Van Halbach, professor of neurosurgery and radiology at UCSF. "About 30 percent die before they even reach the emergency room. Of the people who do reach the ER, another 20 percent or so will die from complications related to the aneurysm, mainly vasospasm and re-bleeding. Only about one-fifth survive a ruptured aneurysm without significant impairment."

The UCSF physicians, including Halbach, Grant Hieshima, Christopher Dowd, and Randall Higashida, all with joint appointments in neurosurgery and radiology, have completed more than 450 non-surgical procedures to repair aneurysms, more than any other group in North America.

In the early 1980s, Hieshima was among the first to demonstrate that repair of an aneurysm in inoperable parts of the brain could be achieved by threading a thin plastic tube, or catheter, into the blood vessel adjacent to the aneurysm site and inserting a silicone balloon through the catheter into the aneurysm sac to serve as a reinforcement.

In performing the new procedure, the UCSF physicians use a catheter to deploy soft, platinum coils that are as thin as threads. The uncoiled platinum threads range from two to 30 centimeters in length and assume a coil diameter of from two millimeters to 20 millimeters when released. Depending on the nature of the aneurysm, the number and size of the coils used to fill the aneurysm sac varies.

Each coil is precisely positioned within the aneurysm pocket before being released by electrolysis. Application of a three-volt electric current leads to a quick corrosion that detaches the coil in a matter of minutes from its Teflon-coated, stainless steel anchor. The current also is believed to stimulate the formation of a blood clot in the aneurysm, which seals it off without blocking the blood vessel.

More repairs completed by UCSF

In recent clinical trials sponsored by the manufacturer of the detachable coils, Target Therapeutics Inc. of Fremont, Calif., the UCSF physicians completed more repairs than medical teams at any of the other 20 participating medical centers.

Brain aneurysms are present in about 1 to 3 percent of the population, according to Halbach. In a small percentage of aneurysms, the thin vessel walls eventually rupture, which leads to often-catastrophic bleeding in the brain.

The bleeding itself, or the blood-vessel-narrowing spasms that often occur in response to the bleeding, can prevent certain brain areas from receiving adequate oxygen, causing a stroke. While most strokes are caused by blocked arteries, ruptured aneurysms account for about 15 to 20 percent.

Although surgical techniques for treating an aneurysm have been refined over the years and have been used with a high rate of success for two decades, some parts of the brain where aneurysms often occur are inaccessible to surgery or pose too great a risk,

(See **ANEURYSM** *on page 7)*

Help for headaches around the holidays

By LISA CISNEROS

About as common as the cold, headaches are part of being human.

Longtime UCSF neurologist Neil Raskin, an international expert on the subject, says it's "normal" to have headaches and statistics show that more than 90 percent of humans do.

But for the 23 million Americans who suffer from recurring migraine — a chronic disease that creates excruciating pain — they feel anything but normal. Lasting between two to 48 hours, the typical migraine often throbs with pain that is limited to one side of the head. But a substantial number of patients have bilateral non-throbbing migraines, says Raskin.

Except for those rare headaches caused by a brain tumor or other serious illness, the vast majority of migraines, which are sometimes accompanied by nausea and vomiting or loss of appetite, pose no major risks to one's health.

Triggered by food and environmental factors, migraines have several symptoms that occur in four well-defined phases: prodrome, aura, headache and postdrome. Most migraineurs experience more than one phase, each of which have varying symptoms.

Speaking at a recent Brown Bag Lecture, Raskin says the key to relieving a headache is to treat it as soon as the symptoms appear and before the pain peaks. The upside to migraines is that there are myriad ways to relieve them for most sufferers and episodes usually weaken with age. The downside is that migraines are inherited and may occur throughout one's lifetime.

And while patients with migraines that recur for more than 20 years is uncommon, Raskin says, they do exist. Mary Morrison of San Rafael has been battling her migraines for some 45 years. From age 12 when she began to have migraines through her college years when she says "they came on with a vengeance," Morrison has sought relief from several doctors who prescribed a variety of medications. "I was in despair," says Morrison. "I began to lose hope. It's scary when you think nothing is working."

It wasn't until this summer when she went to Raskin, who prescribed Imitrex, that the pain in her head started to subside.

Pathogenesis of the migraine

Derived from a French translation from the Greek meaning "half the head," migraines have been the source of much confusion throughout history. Although the prehistoric practice of cutting away pieces of the skull to treat migraines is long gone, the connection between migraines and mental disorders and the notion that they are psychosomatic have persisted well into the 20th century.

(See **HEADACHES** *on page 7)*

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